PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE e Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/604,123 TRANSMITTAL Filing Date June 26, 2003 **FORM** First Named Inventor Peter J. Kumpon (to be used for all correspondence after initial filing) Art Unit 2652 **Examiner Name** Chen, Tianjie Total Number of Pages in This Submission Attorney Docket Number 1046 024 ENCLOSURES (check all that apply) After Allowance Communication to Fee Transmittal Form ☐ Drawing(s) Technology Center (TC) Appeal Communication to Board of Fee Attached Licensing-related Papers Appeals and Interferences Appeal Communication to TC Amendment / Reply Petition (Appeal Notice, Brief, Reply Brief) Petition to Convert to a After Final Proprietary Information **Provisional Application** Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address ☐ Terminal Disclaimer Other Enclosure(s) Extension of Time Request (please identify below): Request for Refund Return Mailroom Postcard; and Certificate Express Abandonment Request of Express Mailing. CD. Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority The Commissioner is authorized to charge any additional fees Remarks to Deposit Account No. 50-0289. Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Wall Marjama & Birinski Firm Indranil/Muker Reg. No. 46,944 Individual name Signature December 8, 2005

CERTIFICATE OF MAILING

Date

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Applicant comms small entity status. See 37 CFR 1.27				_	Art Unit 2652								
TOTAL OUNT OF PAYMENT \$310.00 Attorney Docket No. 1046_024													
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METHOD OF PAYMENT (check all that apply)  Check Credit Card Money Order None Other (please identify):													
Deposit Account Deposit Account Number: 50-0289 Deposit Account Name: Wall Marjama & Bilinski LLP  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
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FEE CALCULA													
1. BASIC FILIN	NG, SEAR												
		FILIN	G FEES		EAF	RCH FEES	EXAN	MINATION FEES			ļ		
Application Type	•	Fee (\$)	Small Entit	_	'e\	Small Entity Fee (\$)	Foo (E)	Small Entity		<u>′</u>	Fees Paid (\$)		
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2. EXCESS CLAIM FEES  Small Entity													
Fee Description								Fe	e (\$)	Fee (\$)			
Each claim over										50		25	
Each independent claim over 3 (including Reissues)							200		100				
Multiple dependent claims								360		180			
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3. APPLICATION SIZE FEE													
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a) (1)(G) and 37 CFR 1.16(s).													
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4. OTHER FEES											Fees Paid (\$)		
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SUBMITTED B		/////	77										
Signature Registration No. 46,944 (Attorney/Agent) Telephone 31										315-425-9000			
Name (Print/Type) / Indranil Mukerji   (Attorney/Agent)   Date December 8, 2005													

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